



CHARITABLE GAMING DIVISION
 101 E. HILLSDALE, BOX 30023
 LANSING, MICHIGAN 48909
 (517) 335-5786
 www.michigan.gov/cg

DISCOUNTED BOOK MASTER CONTROL SHEET

Organization Name	Completed By	Event Date
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	Verification Slip Number	Adm. or Adm. Cards	# Books \$_____	Total Purchases		Verification Slip Number	Adm. or Adm. Cards	# Books \$_____	Total Purchases								
	41									63							
	42									64							
	43									65							
	44									66							
	45									67							
	46									68							
	47									69							
	48									70							
	49									71							
	50									72							
	51									73							
	52									74							
	53									75							
	54									76							
	55									77							
	56									78							
	57									79							
	58									80							
	59									81							
	60									82							
	61									83							
	62									84							
	Totals									Totals							

COMPLETION: Required.
 PENALTY: Failure to complete this form may result in administrative action.
 BSL-CG-1625B(R8/02)



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	Verification Slip Number	Adm. or Adm. Cards	# Books \$_____	Total Purchases		Verification Slip Number	Adm. or Adm. Cards	# Books \$_____	Total Purchases								
85									107								
86									108								
87									109								
88									110								
89									111								
90									112								
91									113								
92									114								
93									115								
94									116								
95									117								
96									118								
97									119								
98									120								
99									121								
100									122								
101									123								
102									124								
103									125								
104									126								
105									127								
106									128								
Totals									Totals								

COMPLETION: Required.
 PENALTY: Failure to complete this form may result in administrative action.
 BSL-CG-1625C(R8/02)



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Organization Name	Completed By	Event Date
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	Verification Slip Number	Adm. or Adm. Cards	# Books	Total Purchases		Verification Slip Number	Adm. or Adm. Cards	# Books	Total Purchases								
			\$_____	\$_____	\$_____	\$_____	\$_____						\$_____	\$_____	\$_____	\$_____	\$_____
129								151									
130								152									
131								153									
132								154									
133								155									
134								156									
135								157									
136								158									
137								159									
138								160									
139								161									
140								162									
141								163									
142								164									
143								165									
144								166									
145								167									
146								168									
147								169									
148								170									
149								171									
150								172									
Totals									Totals								

COMPLETION: Required.
 PENALTY: Failure to complete this form may result in administrative action.
 BSL-CG-1625D(R8/02)



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Organization Name	Completed By	Event Date
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	Verification Slip Number	Adm. or Adm. Cards	# Books \$_____	Total Purchases		Verification Slip Number	Adm. or Adm. Cards	# Books \$_____	Total Purchases								
173									195								
174									196								
175									197								
176									198								
177									199								
178									200								
179									201								
180									202								
181									203								
182									204								
183									205								
184									206								
185									207								
186									208								
187									209								
188									210								
189									211								
190									212								
191									213								
192									214								
193									215								
194									216								
	Totals									Totals							

COMPLETION: Required.
 PENALTY: Failure to complete this form may result in administrative action.
 BSL-CG-1625E(R8/02)



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DISCOUNTED BOOK MASTER CONTROL SHEET

Organization Name	Completed By	Event Date
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	Verification Slip Number	Adm. or Adm. Cards	# Books	Total Purchases		Verification Slip Number	Adm. or Adm. Cards	# Books	Total Purchases								
			\$_____	\$_____	\$_____	\$_____	\$_____						\$_____	\$_____	\$_____	\$_____	\$_____
217								239									
218								240									
219								241									
220								242									
221								243									
222								244									
223								245									
224								246									
225								247									
226								248									
227								249									
228								250									
229								251									
230								252									
231								253									
232								254									
233								255									
234								256									
235								257									
236								258									
237								259									
238								260									
Totals									Totals								

COMPLETION: Required.
 PENALTY: Failure to complete this form may result in administrative action.
 BSL-CG-1625F(R8/02)